MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/712390
FILING DATE 11-14-00
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51						
2	0	1						52						
3		1						53						
4	1							54						
5	1							55						
6	1	1						56						
7	1							57						
8		1						58						
9		1						59						
10		1						60						
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14	1							64						
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47								97						
48								98						
49								99						
50								100						
TOTAL IND.	5							TOTAL IND.						
TOTAL DEP.	9							TOTAL DEP.						
TOTAL CLAIMS	14							TOTAL CLAIMS						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMDENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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